

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY BREATH ALCOHOL PROGRAM

INTOX DMT MAINTENANCE REPORT

REPORT #1

Complete this report at the time of the regular monthly procomplete this report whenever the instrument is serviced Retain the original and send a copy within 15 days to the	or repaired and whenever it is place		•
INTOX DMT SN NAME OF AGENCY 500086 Missouri State Highv	way Patrol	DATE OF INSPECTION 10/08/2024	
LOCATION OF INSTRUMENT (STREET AND CITY) Branson West PD,110 Silver Lady Ln,Branson West	TIME OF INSPECTION 19:04:09		
CHECKLIST: Place a mark in the box by each item if four values where determined). Unmarked items must be corr	and to be satisfactory or is operating rected before using instrument.	within established limits. (W	/rite in observed
☑ DIAGNOSTIC RECORD			
DATE AND TIME 10/08/2024 19:04:11	□ DETECTOR	-	
☑ PROGRAM	☐ FILTER 1		
☑ SAMPLE CHAMBER 48.8°C	☑ FILTER 2		
	☑ FILTER 3		
☑ PUMP	☑ INTERNAL STA	ANDARD	
BREATH ANALYZER ACCURACY STANDARDS			
☐ SIMULATOR STANDARD	. COMPRESSED	DETHANOL-GAS MIXTURE	Ē
☐ STANDARD SUPPLIER INTOXIMETERS	LOT# <u>AG335303</u>	EXP. DATE 12	2/19/2025
☐ SIMULATOR TEMP (34°C ± 0.2°C)	SIM. SN	SIM. NIST EXP DATE	
Run three tests using a standard. All three tests mus of .005 or less. Mark the box corresponding to the s © 0.10% STANDARD - MUST READ BETWE 0.08% STANDARD - MUST READ BETWE	standard being used. EEN 0.095% AND 0.105% INCLUSI EEN 0.076% AND 0.084% INCLUSI	IVE	
TEST 1: 0.099 TEST 2	2: 0.098	TEST 3: 0.098	
☑ PERFORM R.F.I. TEST		¥	
INDICATE THE NUMBER OF BREATH TESTS IN TH	HE FOLLOWING RANGES SINC	E THE LAST MAINTENAN	ICE REPORT:
REFUSALS: 0 004: 11 .0509	0:1 .1014:2	.1519: 0	OVER .19: 0
LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION ESTABLISHED LIMITS (USE OTHER SIDE IF NECESSARY)	THAT WAS MADE TO RESTORE THE INSTRUME	NT TO OPERATE SATISFACTORILY AN	D WITHIN
INSPECTING OFFICER			
SIGNATURE	PRINT FULL NAME CHRISTOPHE	ER SCHMIDT	
TYPE II PERMIT NUMBER 240207		E NUMBER 79-9039	
	Alcohol Program, Missouri Departme fax, or email	ent of Health and Senior Serv	vices



Airgas USA LLC (LAB) 3500 Bernard Street

St. Louis, Mo. 63103 Ph: (314) 533-3100 Fax: (314) 533-7328

Certificate of Analysis

Customer Name Exclusive Supplier Intoximeters, Inc. 2081 Craig Road

St. Louis, Mo 63146

Test Date: 19-Dec-2023

Lot # AG335303 Model 108

Exp Date 19-Dec-2025 Cyl. Type

Component Ethanol

Certified Concentration 0.100 ± 2% BrAC (260 ppm)

108 Nitrogen

Certification Traceable to N.I.S.T. RGM and to CRM Ethanol Standards:

RGM Serial No. Concentration EB0010581 391.8 ppm EB0010570 259.8 ppm EB0010285 209.0 ppm EB0010561 103.7 ppm EB0010681 52.22 ppm

RGM Serial No. Concentration EB0010603 392.5 ppm EB0010559 258.9 ppm 104.2 ppm EB0010562 EB0010579 52.94 ppm

CRM Serial No. CC727481

Concentration 799.4 ppm 253.4 ppm

CRM Serial No. CC727493 CC727498

Concentration 389.8 ppm

150.2 ppm

Analytical Method: NDIR

CC727496

Digitally signed by:Quality Control Reason:Dry gas standard certification of analysis Location:Airgas USA LLC (Lab) Date:12.21.2023 20:20

Approved for Release:

Yusef Woods

ISO 17025:2017 A2LA accredited. Certificate Number 3082.06 ISO 17034:2016 A2LA accredited. Certificate Number 3082.07



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



PERMIT TYPE || CHRISTOPHER T. SCHMIDT

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

ALCO-SENSOR IV WITH PRINTER, INTOX DMT

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

11/

DATE9/1	9/10/2024	adam / fuli
		DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER	240207	
EXPIRES	XPIRES 9/10/2026	Davla J. Nichelson
		DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)



The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.

Operator SCHMIDT, CHRISTOPHER

Permit No 240207

